



## APPLICATION DATA SHEET

### **Application Information**

Application Number:: 10/820,643  
Filing Date:: 04/08/04  
Application Type:: Regular  
Subject Matter:: Utility  
CD-ROM or CD-R?:: None  
Title:: System-Level Simulation of Interconnected Devices  
Attorney Docket Number:: CDS-007  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: Fig. 2  
Total Drawing Sheets:: 9  
Small Entity?:: No  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Matthew  
Middle Name::  
Family Name:: Bellantoni  
Name Suffix::  
City of Residence:: Brookline  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 60 East Glen Road T-12  
City of Mailing Address:: Brookline  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02445

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: William  
Middle Name::  
Family Name:: Neifert  
Name Suffix::  
City of Residence:: Arlington  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 100 Pleasant Street, #31  
City of Mailing Address:: Arlington  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02476

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Andrew  
Middle Name::  
Family Name:: Ladd  
Name Suffix::  
City of Residence:: Maynard  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 20-6 Deer Path Lane  
City of Mailing Address:: Maynard  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 01754

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity

Given Name:: Matthew  
Middle Name::  
Family Name:: Grasse  
Name Suffix::  
City of Residence:: Watertown  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 56 Harrington Street  
City of Mailing Address:: Watertown  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02472

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name::  
Family Name:: Kostick  
Name Suffix::  
City of Residence:: Belmont  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 30 Fairview Avenue  
City of Mailing Address:: Belmont  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02478

#### **Correspondence Information**

Correspondence Customer Number:: 021323

#### **Representative Information**

Representative Customer Number:: 021323